

## PART B - FEE(S) TRANSMITTAL

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Alexandria, Virginia 22313-1450  
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27975 7590 06/02/2006

ALLEN, DYER, DOPPELT, MILBRATH & GILCHRIST P.A.  
1401 CITRUS CENTER 255 SOUTH ORANGE AVENUE  
P.O. BOX 3791  
ORLANDO, FL 32802-3791

## Certificate of Mailing or Transmission

I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.

JUSTIN GORGE	(Depositor's name)
<i>Justin Gorge</i>	(Signature)
AUGUST 28, 2006	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
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09/914,944

11/25/2003

Robert Joseph Mears

62607

7137

TITLE OF INVENTION: Gratings CONFIGURABLE APERIODIC GRATING DEVICE

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
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nonprovisional

YES

\$700

\$0

\$700

09/05/2006

EXAMINER	ART UNIT	CLASS-SUBCLASS
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PALMER, PHAN T H

2874

385-037000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
- ☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list

- (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,
- (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

ALLEN, DYER, DOPPELT,  
MILBRATH & GILCHRIST, P.A.  
Attorneys at Law  
255 S. Orange Ave. Ste. 1401  
P. O. Box 3791  
Orlando, FL 32802-3791

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

RJ MEARS, LLC

WALTHAM, MA

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

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Authorized Signature

Date

Typed or printed name

CHRISTOPHER F. REGAN

Registration No.

34,906

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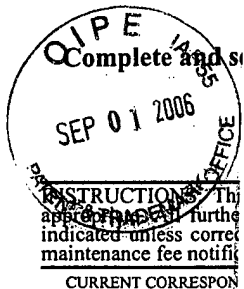
09/05/2006 EAREGAY2 00000060 09914944

01 FC:2501

700.00 OP

02 FC:1504

300.00 OP



27975

ALLEN, DY  
1401 CITRUS  
P.O. BOX 379  
ORLANDO, F

APPLICATION NO.

09/914,944

TITLE OF INVENTION

APPLN. TYPE

nonprovisional

E

PALM

1. Change of correspondence (CFR 1.363).

- ☐ Change of correspondence Address form PTO/S  
☐ "Fee Address" in PTO/SB/47; Rev 03/ Number is required

3. ASSIGNEE NAME

PLEASE NOTE: Use recordation as set forth

(A) NAME OF ASS

RJ MEAL

Please check the appropriate

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Authorized Signature

Date August 28, 2006

Typed or printed name CHRISTOPHER F. REGAN

Registration No. 34,906

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